

underwent urgent endovenous radiofrequency thermal ablation of the patent segment of the great saphenous vein in order to obliterate the origin of the pulmonary emboli. There was rapid resolution of symptoms.

**Conclusion:** Endovenous ablation of the great saphenous vein has not been used before for the treatment of this condition.

<http://dx.doi.org/10.1016/j.ejvs.2013.12.005>

DOI of original article: <http://dx.doi.org/10.1016/j.ejvsextra.2013.11.007>

Available online 4 January 2014

---

### Superficial Venous Thrombophlebitis Following Electromyography

M.G. Delgado <sup>\*</sup> and C. Costas

*Neurology Service and Internal Medicine Service, Hospital Universitario Central de Asturias, Spain*

**Introduction:** Superficial venous thrombophlebitis (SVT) may have potential morbidity as a consequence of extension to the deep venous system and subsequent pulmonary embolism.

**Report:** A 72-year-old male with several varicose veins consulted because of right leg radicular pain. An electromyography was performed. After 24 hours the patient developed severe pain in the right calf with erythema on the medial aspect. A diagnosis of SVT was made.

**Discussion:** The need for invasive studies, such as an electromyography, in patients with varicose veins should be

carefully considered to minimise the possibility of this potential ‘major’ complication.

<http://dx.doi.org/10.1016/j.ejvs.2013.12.006>

DOI of original article: <http://dx.doi.org/10.1016/j.ejvsextra.2013.11.008>

Available online 17 January 2014

---

### Intimal Angiosarcoma of the Carotid Artery

K. Hirsch <sup>a,\*</sup>, J. Falkensammer <sup>a</sup>, T. Starkl <sup>a</sup>, B. Richter <sup>b</sup>, A. Beham <sup>c</sup>, A. Assadian <sup>a</sup>

<sup>a</sup> *Department of Vascular and Endovascular Surgery, Wilhelminenhospital, Vienna, Austria*

<sup>b</sup> *Department of Pathology, Wilhelminenhospital, Vienna, Austria*

<sup>c</sup> *Institute of Pathology, Medical University of Graz, Austria*

**Introduction:** Intimal angiosarcoma of the carotid artery is extremely rare.

**Report:** We report the case of a 77-year-old-man who presented with a 2-month history of a right-lateral cervical mass and paralysis of cranial nerves with a chronic occlusion of the carotid artery. The patient underwent en-bloc tumour resection. Diagnosis was made using immunohistochemical testing: tumour cells were positive for CD31, vimentin, and CD68 (in this case), and negative for CD34 and cytokeratin.

**Discussion:** Even after successful removal of the tumour and adjuvant therapy, prognosis is poor.

<http://dx.doi.org/10.1016/j.ejvs.2013.11.012>

DOI of original article: <http://dx.doi.org/10.1016/j.ejvsextra.2013.11.001>

Available online 6 January 2014